AUG 1 0 LOS PTO/SB/17 (01-06)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Los of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Fees pursuant to the Consolidate	Complete if Known						
FEE TRANSMITTAL For FY 2006			Application Num	nber (	09/459,062-Co	nf. #9639	
			Filing Date		December 10, 1999		
			First Named Inv	entor	Tao TAO		
			Examiner Name		S. B. Chen		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit		1648		
TOTAL AMOUNT OF PAYM	Attorney Docket No. 1173-1053PUS1						
METHOD OF PAYMENT (check all that apply)							
x Check Credit Card Money Order None Other (please identify):							
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
x Credit any overpayments							
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Augliostica Tuna	Fac (\$)	Small Entity	Small Entity	Fan (\$)	Small Entity	F 5	aid (#)
Application Type	Fee (\$)	Fee (\$) Fee (\$		Fee (\$)	Fee (\$)	rees r	'aid (\$)
Utility	300	150 500	250	200	100		
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100 0	0	0	0		
2. EXCESS CLAIM FEES Small Entity							
Fee Description Fee (\$)							
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						200	100
Multiple dependent claims						360	180
Total Claims Extra C	I Claims Extra Claims Fee (\$) Fee Paid (\$)		Paid (\$)	Multiple Dependent Claims			
HP = highest number of total claim	s paid for, if	greater than 20.	<del></del>	<u>Fe</u>	<u>ee (\$)                                  </u>	ee Paid (\$	1
Indep. Claims Extra C	laims	Fee (\$) Fee	Paid (\$)				_
x =x							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
100 = /50 (round up to a whole number) x =							
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)							
Other (e.g., late filing surcharge). 1251 Extension for response within first month 120.00							
1814 Statutory Disclaimer 130.00							
SUBMITTED BY		3.77	Inches of	. — —			
Signature and	<u>گىي</u> ل		Registration No. (Attorney/Agent)	36,623	Telephone	(703) 20	5-8043
Name (Print/Type) Mark . Nu	rell				Date Aug.	18,20	×06
					<del></del>		